

State of Utah
Administrative Rule Analysis

NOTICE OF PROPOSED RULE

The agency identified below in box 1 provides notice of proposed rule change pursuant to *Utah Code* Sections 63-46a-4. Please address questions regarding information on this notice to the agency. The full text of all rule filings is published in the *Utah State Bulletin* unless excluded because of space constraints. The full text of all rule filings may also be inspected at the Division of Administrative Rules.

DAR file no:		Date filed:	
Utah Admin. Code ref. (R no.):	R156-31b	Time filed:	
Changed to Admin. Code Ref. (R no.):			

1.	Agency:	Commerce/Division of Occupational and Professional Licensing		
	Room no.:			
	Building:	Heber M. Wells Building		
	Street address 1:	160 East 300 South		
	Street address 2:			
	City, state, zip:	Salt Lake City UT 84111-2316		
	Mailing address 1:	PO Box 146741		
	Mailing address 2:			
	City, state, zip:	Salt Lake City UT 84114-6741		
	Contact person(s):			
	Name:	Phone:	Fax:	E-mail:
	Laura Poe	801-530-6789	801-530-6511	lpoe@utah.gov

(Interested persons may inspect this filing at the above address or at DAR between 8:00 a.m. and 5:00 p.m. on business days.)

2.	Title of rule or section (catchline):
	Nurse Practice Act Rule
3.	Type of notice:
	New ___; Amendment XX; Repeal ___; Repeal and Reenact ___
4.	Purpose of the rule or reason for the change:
	The Division and Nursing Board are proposing amendments to change the standards and process for approval of nursing education programs. This filing also includes other various amendments which have been suggested by Board members, licensees, employers, education programs and Division staff.
5.	This change is a response to comments from the Administrative Rules Review Committee.
	Yes ___; No XX
6.	Summary of the rule change:

Section 102-Definitions: Definitions were updated and amended to be consistent with language used throughout the rule including "academic year", "equivalent to an approved practical nursing education program", "nurse accredited", and "parent academic institution". The definition for "licensure by equivalency" is deleted and included in the "equivalent to an approved practical nursing education program" definition. Section 302a-Education: Amendments clarify that only students enrolled in an RN program with full approval status are eligible for licensure as an LPN by equivalency. Section 302c-Examinations: Amendments establish a new standard by which an examination for licensure under this chapter must be taken within three years from the date of completion or within four attempts. Adds the Acute Care Nurse Practitioner Certification exam to the list of approved exams for licensure as an advanced practice registered nurse (APRN). Deletes the Advance Critical Care Examination which is no longer available from the list of approved exams. Indicates the Division will not authorize any review or challenge to any exam required for licensure or certification under this chapter. Section 304-Temporary licensure: Amendments clarify that an applicant for a temporary licensed practical nurse (LPN) or registered nurse (RN) must be a graduate from a nursing program with full approval status. Shortens the time an RN or LPN temporary license is issued from 120 days to 90 days to match the same length of time the authorization to test is valid. Clarifies that a temporary license issued to a foreign graduate may be issued for up to one year, but the time cannot be extended, thus allowing the person at least two opportunities to test. Section 306-Inactive, Reinstatement or Relicensure: Amendments change the time frame by which a person without an active license may reapply and the manner in which current competency will be measured. Section 309-Intern license: Amendments clarify that an Intern license is issued for 90 days unless the applicant is specializing in psychiatric mental health nursing, then the Intern license is issued for one year and can be extended in yearly increments not to exceed five years. Clarifies it is the responsibility of the APRN Intern to report examination results to the Division. Section 310-Licensure by endorsement: Amendments establish the standard that an applicant for licensure by endorsement must have a current, active license in another state or have passed the required examination within six months of making application for licensure in Utah. Section 601-Standards for parent academic institution offering nursing education program: Current language is deleted and new language establishes the standards that must be met by the parent academic institution in order to offer a nursing education program that can be approved by the Division in collaboration with the Nursing Board. Section 602-Categories of nursing education program approval: Current language is deleted and new language establishes three categories of approval status: full, provisional, and probationary. All programs that have full approval status must meet the criteria established in the rule. Establishes a time-frame that must be followed by a provisionally approved program in order to become nationally accredited and obtain full approval status. Section 603-Nursing education program standards: Current language is deleted and new language establishes the general standards that all nursing education programs leading toward licensure must meet to receive and maintain full approval status. Establishes quality improvement evaluation criteria. Delineates curriculum standards. Clarifies the qualifications for the nursing program administrator, faculty, preceptors, clinical adjunct faculty and interdisciplinary faculty. Establishes a minimum pass rate of the National Council Licensure Examination of the National Council of State Board of Nursing (NCLEX) examinations that must be consistently met to maintain approval status. Clarifies requirement for hands-on, supervised clinical experiences throughout the life span. Clarifies additional requirements for APRN programs. Section 604-Nursing education program disciplinary action: Current language is deleted and new language clarifies the reasons a nursing education program may be disciplined and establishes the process that must be followed for a program to be disciplined. Section 606-Nursing education program surveys: Amendments clarify that all programs granted provisional approval status shall submit all correspondence between the school and the nurse accrediting body to the Division. Section 607-Approved nursing education programs located outside of Utah: Amendments clarify the criteria a nursing program must meet in order for its graduates to qualify for a license in Utah. Section 608-Standards for out-of-state programs providing clinical experiences in Utah: This section is renumbered from Section 607. Sections 703 and 704-Generally recognized scope of practice: Amendments eliminate the word "client" leaving only the term "patient". In a prior rule filing the term "patient" was defined to include a "client". These two sections were overlooked and not included in the prior rule filing.

7. Aggregate anticipated cost or savings to:

A) State budget:

	<p>The Division will incur minimal costs of approximately \$100 to reprint the rule once the proposed amendments are made effective. Any costs incurred will be absorbed in the division's current budget. State schools with nursing education programs will not be held to the same standards as programs with provisional approval. Schools may find it difficult to hire enough qualified faculty and may have to increase salaries to entice graduate prepared nurses to become faculty members. Additional costs should be minimal because the national accreditation standards (currently required of all programs with full approval status) already require the graduate prepared nurse for faculty.</p>
	<p>B) Local government:</p>
	<p>There should be little or no effect on local government as a result of the proposed amendments. Local governments do not operate nursing education programs and few operate any kind of health care facility.</p>
	<p>C) Small businesses (fewer than 50 employees) AND persons other than businesses:</p>
	<p>Small business and Persons: A proprietary school which is not regionally accredited and offers a nursing education program would be required to develop an articulation agreement or contract with a regionally accredited institution to offer the pre-requisite and co-requisite courses. Currently, all the schools offering nursing education courses meet this standard so there should not be an effect on the school. Also, Utah has on proprietary school with a nursing education program that has full approval status. Once these proposed amendments are adopted, the program would be required to only hire graduate prepared faculty or someone who is currently enrolled in a graduate program. Given this is already the standard for national accreditation, there should be little or no effect on the school. The proposed changes to the nursing education approval standards and the requirement that all schools meet these standards may have a financial effect on the schools offering nursing education programs. Compliance may require the addition of qualified faculty members or changes to curriculum. The cost of any such changes are unknown. Also, if a program loses its approval status due to non-compliance with the standards, such as the NCLEX exam pass rate, the program would be forced to stop accepting students and close causing a loss of income. However, a student who pays \$50,000 for a nursing program who cannot pass the licensure examination and thus become licensed has lost a significant amount of money in tuition and time. The proposed amendments also shorten the length of time a nurse can be out of practice and still reinstate a license. A nurse out of practice 10 or more years would incur the cost of completing a current nursing education program (\$2,500 - \$10,000 depending on the type of program and the educational institution), apply for licensure which includes application fees of \$98 for LPN/RN and \$139 for APRN and retake the examination which includes (examination fees of \$200 for LPN/RN and \$600 for APRN. An applicant who cannot pass the licensure examination within the three years or four tries would also be required to pay the additional examination fees and application fee. The Division is not able to determine how many nurses would be affected by these two requirements due to varying factors.</p>
8.	<p>Compliance costs for affected persons ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization or any character other than an agency):</p>
	<p>Nursing education programs that cannot meet the new standards would not be allowed to accept new students until the standards are met, or would need to close if the standards cannot be met. This would have a significant effect on the school. A graduate of a program who cannot pass the licensure exam and become licensed, experiences a significant loss of money and time and still cannot provide a livelihood for herself. It is better to remediate or close a program that cannot meet outcomes than to continue to allow students to enroll in the program with a high probability of failing to become licensed. The proposed amendments also shorten the length of time a nurse can be out of practice and still reinstate a license. A nurse out of practice 10 or more years would incur the cost of completing a current nursing education program (\$2,500 - \$10,000 depending on the type of program and the educational institution), apply for licensure which includes application fees of \$98 for LPN/RN and \$139 for APRN and retake the examination which includes (examination fees of \$200 for LPN/RN and \$600 for APRN. An applicant who cannot pass the licensure examination within the three years or four tries would also be required to pay the additional examination fees and application fee.</p>
9.	<p>Comments by the department head on the fiscal impact the rule may have on businesses:</p>

	<p>This rule filing generally adopts nursing education approval standards already used for national accreditation. Thus the costs to the schools should be minimal are discussed in the rule filing, and such costs are likely outweighed by the positive impact to students who will receive better preparation for examinations and to the public who receives better nursing care. The amendments which shorten the length of time a nurse can be out of practice and still reinstate a license and that limit the number of times a person may take an examination will result in costs to licensees or applicants, but such costs are again outweighed by the benefit to the public in receiving services from properly educated and trained individuals. Francine A. Giani, Executive Director</p>		
10.	<p>This rule change is authorized or mandated by state law, and implements or interprets the following state and federal laws. State code or constitution citations (required):</p>		
	<p>Section 58-31b-101 and Subsections 58-1-106(1)(a) and 58-1-202(1)(a)</p>		
11.	<p>This rule adds, updates, or otherwise changes the following titles of materials incorporated by references (a copy of materials incorporated by reference must be submitted to DAR; if none, leave blank):</p>		
	<p>Deletes the Directory of Accredited Nursing Programs, 2006-2007 edition, published by the National League for Nursing Accrediting Commission</p>		
12.	<p>The public may submit written or oral comments to the agency identified in box 1. (The public may also request a hearing by submitting a written request to the agency. The agency is required to hold a hearing if it receives requests from ten interested persons or from an association having not fewer than ten members. Additionally, the request must be received by the agency not more than 15 days after the publication of this rule in the <i>Utah State Bulletin</i>. See Section 63-46a-5 and Rule R15-1 for more information.)</p>		
	A) Comments will be accepted until 5:00 p.m. on (mm/dd/yyyy):		08/14/2008
	B) A public hearing (optional) will be held:		
	on (mm/dd/yyyy):	at (time):	At (place):
	07/18/2008	1:00 pm	160 East 300 South, Conference Room 474 (4th floor), Salt Lake City, Utah
13.	This rule change may become effective on (mm/dd/yyyy):		08/21/2008
	<p>NOTE: The date above is the date on which this rule MAY become effective. It is <i>NOT</i> the effective date. After the date designated in Box 12(A) above, the agency <i>must</i> submit a Notice of Effective Date to the Division of Administrative Rules to make this rule effective. Failure to submit a Notice of Effective Date will result in this rule lapsing and will require the agency to start the rulemaking process over.</p>		
14.	Indexing information -- keywords (maximum of four, in lower case, except for acronyms (e.g., "NASA") or proper nouns (e.g., "Medicaid")):		
	licensing	nurses	
15.	Attach an RTF document containing the text of this rule change (filename):		R156-31b.pr2
<p>To the agency: Information requested on this form is required by Sections 63-46a-4, 5, 6, and 10. Incomplete forms will be returned to the agency for completion, possibly delaying publication in the <i>Utah State Bulletin</i>, and delaying the first possible effective date.</p>			

AGENCY AUTHORIZATION

**Agency head or designee,
and title:**

F. David Stanley, Director

Date (mm/dd/yyyy):

06/17/2008

R156. Commerce, Occupational and Professional Licensing.

R156-31b. Nurse Practice Act Rule.

R156-31b-102. Definitions.

In addition to the definitions in Title 58, Chapters 1 and 31b, as defined or used in this rule:

(1) "Academic year", as used in Section R156-31b-601, means three quarters or two semesters. A quarter is defined to be equal to ten weeks and a semester is defined to be equal to 14 or 15 weeks.

(~~1~~2) "Affiliated with an institution of higher education", as used in Subsection 58-31b-601(1), means the general and science education courses required as part of a nursing education program are provided by an educational institution which is approved by the Board of Regents or an equivalent governmental agency in another state or a private educational institution which is regionally accredited by an accrediting board recognized by the Council for Higher Education Accreditation of the American Council on Education; and the nursing program and the institution of higher education are affiliated with each other as evidenced by a written contract or memorandum of understanding.

(~~2~~3) "APRN" means an advanced practice registered nurse.

(~~3~~4) "APRN-CRNA" means an advanced practice registered nurse specializing and certified as a certified registered nurse anesthetist.

(~~4~~5) "Approved continuing education" in Subsection R156-31b-303(3) means:

(a) continuing education that has been approved by a professional nationally recognized approver of health related continuing education;

(b) nursing education courses taken from an approved education program as defined in Subsection R156-31b-~~601~~102(6); and

(c) health related course work taken from an educational institution accredited by a regional institutional accrediting body identified in the "Accredited Institutions of Postsecondary Education", 2006-2007 edition, published by the American Council on Education.

(~~5~~6) "Approved education program" as defined in Subsection 58-31b-102(3) is further defined to include any nursing education program located within the state of Utah which meets the standards established in Sections R156-31b-601, 602 and 603; and any nursing education program located outside of Utah which meets the standards established in Section R156-31b-607~~[published in the documents entitled "Directory of Accredited Nursing Programs", 2006-2007, published by the National League for Nursing Accrediting Commission, which are hereby adopted and incorporated by reference as a part of this rule]~~.

(~~6~~7) "CCNE" means the Commission on Collegiate Nursing Education.

(~~7~~8) "CGFNS" means the Commission on Graduates of Foreign Nursing Schools.

(~~8~~9) "COA", as used in this rule, means the Council of Accreditation of Nurse Anesthesia Education Programs.

(~~9~~10) "Clinical ~~mentor~~preceptor", as used in Section R156-31b-60~~7~~8, means an individual who is employed by a clinical health care

facility and is chosen by that agency, in collaboration with the Parent Nursing Education-Program, to provide direct, on-site supervision and direction to a nursing student who is engaged in a clinical rotation, and who is accountable to both the clinical agency and the supervisory clinical faculty member.

(~~10~~11) "Comprehensive nursing assessment", as used in Section R156-31b-704, means an extensive data collection (initial and ongoing) for individuals, families, groups and communities addressing anticipated changes in patient conditions as well as emergent changes in patient's health status; recognizing alterations to previous patient conditions; synthesizing the biological, psychological, spiritual and social aspects of the patient's condition; evaluating the impact of nursing care; and using this broad and complete analysis to make independent decisions and identification of health care needs; plan nursing interventions, evaluate need for different interventions and the need to communicate and consult with other health team members.

(~~11~~12) "Contact hour" means 60 minutes.

(~~12~~13) "Delegatee", as used in Sections R156-31b-701 and 701a, means one or more competent persons receiving a delegation who acts in a complementary role to the delegating nurse, who has been trained appropriately for the task delegated, and whom the delegating nurse authorizes to perform a task that the delegates is not otherwise authorized to perform.

(~~13~~14) "Delegation" means transferring to delegates the authority to perform a selected nursing task in a selected situation. The delegating nurse retains accountability for the delegation.

(~~14~~15) "Delegation", as used in Sections R156-31b-701 and 701a, means the nurse making the delegation.

(~~15~~16) "Diabetes medical management plan (DMMP)", as used in this rule, means an individualized plan that describes the health care services that the student is to receive at school. The plan is developed and signed by the student's parent or guardian and health care team. It provides the school with information regarding how the student will manage diabetes at school on a daily basis. The DMMP shall be incorporated into and shall become a part of the student's IHP.

(~~16~~17) "Direct supervision" is the supervision required in Subsection 58-31b-306(1)(a)(iii) and means:

(a) the person providing supervision shall be available on the premises at which the supervise is engaged in practice; or

(b) if the supervise is specializing in psychiatric mental health nursing, the supervisor may be remote from the supervise if there is personal direct voice communication between the two prior to prescribing a prescription drug.

(~~17~~18) "Disruptive behavior", as used in this rule, means conduct, whether verbal or physical, that is demeaning, outrageous, or malicious and that places at risk patient care or the process of delivering quality patient care. Disruptive behavior does not include criticism that is

offered in good faith with the aim of improving patient care.

(19) "Equivalent to an approved practical nursing education program", as used in Subsection 58-31b-302(2) (e), means the applicant for licensure as an LPN by equivalency is currently enrolled in an RN education program with full approval status, and has completed course work which is equivalent to the course work of an NLNAC accredited practical nursing program.

~~(18)~~20 "Focused nursing assessment", as used in Section R156-31b-703, means an appraisal of an individual's status and situation at hand, contributing to the comprehensive assessment by the registered nurse, supporting ongoing data collection and deciding who needs to be informed of the information and when to inform.

~~(19)~~21 "Individualized healthcare plan (IHP), as used in Section R156-31b-701a, means a plan for managing the health needs of a specific student, written and reviewed at least annually by a school nurse. The IHP is developed by a nurse working in a school setting in conjunction with the student and the student's parent or guardian to guide school personnel in the care of a student with medical needs. The plan shall be based on the student's practitioner's orders for the administration of medications or treatments for the student, or the student's DMMP.

~~(20)~~22 "Licensure by equivalency" as used in this rule means licensure as a licensed practical nurse after successful completion of course work in a registered nurse program which meets the criteria established in Sections R156-31b-601 and R156-31b-603.

~~(21)~~23 "LPN" means a licensed practical nurse.

~~(22)~~24 "Medication", as used in Sections R156-31b-701 and 701a, means any prescription or nonprescription drug as defined in Subsections 58-17b-102(39) and (61) of the Pharmacy Practice Act.

~~(23)~~25 "NLNAC" means the National League for Nursing Accrediting Commission.

~~(24)~~26 "NCLEX" means the National Council Licensure Examination of the National Council of State Boards of Nursing.

~~(25)~~27 "Non-approved education program" means any foreign nurse education program.

~~(26)~~28 "Nurse", as used in this rule, means an individual licensed under Title 58, Chapter 31b as a licensed practical nurse, registered nurse, advanced practice registered nurse, or advanced practice registered nurse-certified registered nurse anesthetist, or a certified nurse midwife licensed under Title 58, Chapter 44a.

(29) "Nurse accredited", as used in this rule, means accreditation issued by NLNAC, CCNE or COA.

~~(27)~~30 "Other specified health care professionals", as used in Subsection 58-31b-102(15), who may direct the licensed practical nurse means:

- (a) advanced practice registered nurse;
- (b) certified nurse midwife;
- (c) chiropractic physician;
- (d) dentist;
- (e) osteopathic physician;
- (f) physician assistant;
- (g) podiatric physician;

- (h) optometrist;
- (i) naturopathic physician; or
- (j) mental health therapist as defined in Subsection 58-60-102(5).

(31) "Parent academic institution", as used in this rule, means the educational institution which grants the academic degree or awards the certificate of completion.

~~((28]~~32) "Parent nursing education-program", as used in Section R156-31b-607, means a nationally accredited, Board of Nursing approved nursing education program that is providing nursing education (didactic, clinical or both) to a student and is responsible for the education program curriculum, and program and student policies.

~~((29]~~33) "Patient", as used in this rule, means a recipient of nursing care and includes students in a school setting or clients of a health care facility, clinic, or practitioner.

~~((30]~~34) "Patient surrogate", as used in Subsection R156-31b-502~~[(4)]~~(1)(d), means an individual who has legal authority to act on behalf of the patient when the patient is unable to act or decide for himself, including a parent, foster parent, legal guardian, or a person designated in a power of attorney.

~~((31]~~35) "Psychiatric mental health nursing specialty", as used in Subsection 58-31b-302(4)(g), includes psychiatric mental health nurse specialists and psychiatric mental health nurse practitioners.

~~((32]~~36) "Practitioner", as used in Sections R156-31b-701 and 701a, means a person authorized by law to prescribe treatment, medication, or medical devices, and who acts within the scope of such authority.

~~((33]~~37) "RN" means a registered nurse.

~~((34]~~38) "School", as used in Section R156-31b-701a, means any private or public institution of primary or secondary education, including charter schools, pre-school, kindergarten, and special education programs.

~~((35]~~39) "Supervision", as used in Sections R156-31b-701 and 701a, means the provision of guidance and review by a licensed nurse for the accomplishment of a nursing task or activity, including the provision for the initial direction of the task, periodic inspection of the actual act of accomplishing the task or activity, and evaluation of the outcome.

~~((36]~~40) "Supervisory clinical faculty", as used in Section R156-31b-60~~[7]~~8, means one or more individuals employed by an approved nursing education program who meet the accreditation and Board of Nursing specific requirements to be a faculty member and are responsible for the overall clinical experiences of nursing students and may supervise and coordinate clinical ~~[mentors/]~~preceptors who provide the actual direct clinical experience.

~~((37]~~41) "Unprofessional conduct" as defined in Title 58, Chapters 1 and 31b, is further defined in Section R156-31b-502.

R156-31b-302a. Qualifications for Licensure - Education Requirements.

In accordance with Sections 58-31b-302(2)(e) and 58-31b-303, the education requirements for licensure are defined as follows:

(1) Applicants for licensure as a LPN by equivalency shall submit written verification from a~~[n-approved]~~ registered nurse education program with full approval status, verifying the applicant is currently enrolled and has completed course work which is equivalent to the course work of an

NLNAC accredited practical nurse program.

(2) Applicants from foreign education programs who are not currently licensed in another state shall submit a credentials evaluation report from one of the following credentialing services which verifies that the program completed by the applicant is equivalent to an approved practical nurse or registered nurse education program.

(a) Commission on Graduates of Foreign Nursing Schools for an applicant who is applying for licensure as a registered nurse; or

(b) Foundation for International Services, Inc. for an applicant who is applying for licensure as a licensed practical nurse.

R156-31b-302c. Qualifications for Licensure - Examination Requirements.

(1) An applicant for licensure under Title 58, Chapter 31b shall pass the applicable licensure examination within three years from the date of completion or graduation from a nursing education program or four attempts whichever is sooner. An individual who does not pass the applicable licensure examination within three years of completion or graduation or four attempts is required to complete another approved nursing education program.

([1]2) In accordance with Section 58-31b-302, the examination requirements for graduates of approved nursing programs are as follows.

(a) An applicant for licensure as an LPN or RN shall pass the applicable NCLEX examination.

(b) An applicant for licensure as an APRN shall pass one of the following national certification examinations consistent with the applicant's educational specialty:

(i) one of the following examinations administered by the American Nurses Credentialing Center Certification:

(A) Adult Nurse Practitioner;

(B) Family Nurse Practitioner;

(C) Pediatric Nurse Practitioner;

(D) Gerontological Nurse Practitioner;

(E) Acute Care Nurse Practitioner;

(F) Clinical Specialist in Medical-Surgical Nursing;

(G) Clinical Specialist in Gerontological Nursing;

(H) Clinical Specialist in Adult Psychiatric and Mental Health Nursing;

(I) Clinical Specialist in Child and Adolescent Psychiatric and Mental Health Nursing; or

(J) Psychiatric and Mental Health Nurse Practitioner (Adult and Family);

(ii) Pediatric Nursing Certification Board;

(iii) American Academy of Nurse Practitioners;

(iv) the National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties;

(v) the Oncology Nursing Certification Corporation Advanced Oncology Certified Nurse if taken on or before July 1, 2005;

(vi) one of the following examinations administered by the American Association of Critical Care Nurses Certification Corporation Inc.:

(A) the Advanced Practice Certification for the Clinical Nurse Specialist in Acute and Critical Care; or

(B) the Acute Care Nurse Practitioner Certification;

(vii) ~~[the Advanced Critical Care Examination administered by the American Association of Critical Care Nurses; or~~

~~—(viii)] the national nurse midwifery certifying examination administered by the [American Midwifery Certification Board, Inc.] Accreditation Commission for Midwifery Education; or~~

(~~[ix]~~viii) the examination of the Council on Certification of Nurse Anesthetists.

(~~[2]~~3) In accordance with Section 58-31b-303, an applicant for licensure as an LPN or RN from a non-approved nursing program shall pass the applicable NCLEX examination.

(4) The examinations required under this Section are national exams and cannot be challenged before the Division.

R156-31b-304. Temporary Licensure.

(1) In accordance with Subsection 58-1-303(1), the division may issue a temporary license to a person who meets all qualifications for licensure as either an LPN or RN, except for the passing of the required examination, if the applicant:

(a) is a graduate of or has completed a Utah-based, ~~[approved]~~ nursing education program with full approval status within two months immediately preceding application for licensure;

(b) has never before taken the specific licensure examination;

(c) submits to the division evidence of having secured employment conditioned upon issuance of the temporary license, and the employment is under the direct, on-site supervision of a fully licensed registered nurse; and

(d) has registered for the appropriate NCLEX examination.

(2) The temporary license issued under Subsection (1) expires the earlier of:

(a) the date upon which the division receives notice from the examination agency that the individual failed the examination;

(b) ~~[four months]~~ 90 days from the date of issuance; or

(c) the date upon which the division issues the individual full licensure.

(2) A temporary license issued in accordance with Section 58-1-303 to a graduate of a foreign nursing education program may be issued for a period of time not to exceed one year from the date of issuance and shall not be renewed or extended.

R156-31b-306. Inactive Licensure, Reinstatement or Relicensure.

(1) In accordance with Subsection 58-1-305(1), an individual seeking activation of an inactive RN or LPN license must document current competency to practice as a nurse as defined in Subsection (3) below.

(2) An individual seeking reinstatement of RN or LPN licensure or relicensure as a RN or LPN in accordance with Subsection R156-1-308g(3)(b), R156-1-308i(3), R156-1-308j(3) and R156-1-308k(2)(c) shall document current competence as defined in Subsection (3) below.

(3) Documentation of current competency to practice as a nurse is established as follows:

(a) an individual who has not practiced as a nurse for five years or

less must document current compliance with the continuing competency requirements as established in Subsection R156-31b-303(3);

(b) an individual who has not practiced as a nurse for more than five years but less than ~~[10]~~eight years must pass the required examinations as defined in Section R156-31b-302c within six months prior to making application for licensure or successfully complete an approved re-entry program;

(c) an individual who has not practiced as a nurse for more than ~~[10]~~eight years but less than ~~[15]~~10 years must pass the required examinations as defined in Section R156-31b-302c within six months prior to making application for licensure and successfully complete an approved re-entry program;

(d) an individual who has not practiced as a nurse for ~~[more than 15]~~10 years shall repeat an approved nursing education program and pass the required examinations as defined in Section R156-31b-302c within six months prior to making application for licensure.

(4) To document current competency for activation, reinstatement or relicensure as an APRN, an individual must pass the required examinations as defined in Section R156-31b-302c and be currently certified or recertified in the specialty area.

R156-31b-309. Intern Licensure.

(1) In accordance with Section 58-31b-306, an intern license shall expire the earlier of:

(a) ~~[immediately upon failing to take the first available examination]~~90 days from the date of issuance, unless the applicant is applying for licensure as an APRN specializing in psychiatric mental health nursing, then the intern license shall be issued for a period of one year and can be extended in one year increments not to exceed five years;

(b) 30 days after notification from the applicant or the examination agency, if the applicant fails the ~~[first available]~~examination; or

(c) upon issuance of an APRN license.

(2) Regardless of the provisions of Subsection (1) of this section, the division in collaboration with the board may extend the term of any intern license upon a showing of extraordinary circumstances beyond the control of the applicant.

(3) It is the professional responsibility of the APRN Intern to inform the Division of examination results and to cause to have the examination agency send the examination results directly to the Division.

R156-31b-310. Licensure by Endorsement.

(1) In accordance with Section 58-1-302, an individual who moves from a Nurse Licensure Compact party state does not need to hold a current license, but the former home state license must have been in good standing at the time of expiration.

(2) An individual under Subsection (1) who has not been licensed or practicing nursing for three years or more is required to retake the licensure examination to demonstrate good standing within the profession.

(3) An applicant for licensure by endorsement must have a current, active license in another state, or pass the required examinations as

defined in Section R156-31b-302c, within six months prior to making application for licensure.

R156-31b-601. [Nursing Education Program Standards] Standards for Parent Academic Institution Offering Nursing Education Program.

In accordance with Subsection 58-31b-601(2), the minimum standards that a parent academic institution offering a nursing education program must meet to qualify graduates for licensure under this chapter are as follows~~[set forth in Sections R156-31b-601, 602, 603, and 604].~~

~~—— (1) Standards for programs located within Utah leading to licensure as a registered nurse or advanced practice registered nurse:~~

~~—— (a) be accredited or preaccredited regionally by a professional accrediting body approved by the Council for Higher Education Accreditation of the American Council on Education, or one of the following national accrediting bodies: the Accrediting Bureau of Health Education Schools (ABHES), the Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT), or the Accrediting Commission of the Distance Education and Training Council (DETC);~~

~~—— (b) admit as students, only persons having a certificate of graduation from a school providing secondary education or the recognized equivalent of such a certificate;~~

~~—— (c) be legally authorized by the State of Utah to provide a program of education beyond secondary education;~~

~~—— (d) provide not less than a two academic year program of study that awards a minimum of an associate degree that is transferable to another institution of higher education;~~

~~—— (e) provide an academic program of study that awards a minimum of a master's degree that is transferable to another institution of higher education if providing education toward licensure as an advanced practice registered nurse;~~

~~—— (f) meet the accreditation standards of either CCNE, NLNAC, or COA as evidenced by accreditation by one of the organizations as required under Subsection R156-31b-602; and~~

~~—— (g) have at least 20 percent of the school's revenue from sources that are not derived from funds provided under title IV, HEA program funds or student fees, including tuition if a proprietary school.~~

~~—— (2) Standards for programs located within Utah leading to licensure as a licensed practical nurse:~~

~~—— (a) be accredited or preaccredited regionally by a professional accrediting body approved by the Council for Higher Education Accreditation of the American Council on Education; or one of the following national accrediting bodies: the Accrediting Bureau of Health Education Schools (ABHES) or the Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT);~~

~~—— (b) admit as nursing students, only persons having a certificate of graduation from a school providing secondary education or the recognized equivalent of such a certificate;~~

~~—— (c) be legally authorized by the State of Utah to provide a program of education beyond secondary education;~~

~~—— (d) provide not less than one academic year program of study that leads to a certificate or recognized educational credential and provides~~

~~courses that are transferable to an institution of higher education;~~

~~(e) meet the accreditation standards of either CCNE or NLNAC as evidenced by accreditation by either organization as required under Subsection R156-31b-602.~~

~~(f) have at least 20 percent of the school's revenue from sources that are not derived from funds provided under title IV, HEA program funds or student fees, including tuition if a proprietary school.~~

~~(3) Programs located outside of Utah leading toward licensure as a nurse must be:~~

~~(a) accredited by the CCNE, NLNAC or COA; and~~

~~(b) approved by the Board of Nursing or duly recognized agency in the state in which the program is offered.]~~

(1) The parent academic institution shall be legally authorized by the State of Utah to provide a program of education beyond secondary education.

(2) The parent academic institution shall admit as students only persons having a certificate of graduation from a school providing secondary education or the recognized equivalent of such a certificate.

(3) At least 20 percent of the parent academic institution's revenue shall be from sources that are not derived from funds provided under title IV, HEA program funds or student fees, including tuition if a proprietary school.

(4) In addition to the standards established in Subsections (1), (2), and (3) above, a parent education institution offering a nursing education program leading toward licensure as an LPN shall:

(a) be accredited or preaccredited regionally by a professional accrediting body approved by the Council for Higher Education Accreditation of the American Council on Education, or one of the following national accrediting bodies: the Accrediting Bureau of Health Education Schools (ABHES), the Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT), Council on Occupational Education, or the Accrediting Commission of the Distance Education and Training Council (DETC); and

(b) provide not less than one academic year program of study that leads to a certificate or recognized educational credential.

(5) In addition to the standards established in Subsections (1), (2), and (3) above, a parent education institution offering a nursing education program leading toward licensure as an RN shall:

(a) be accredited or preaccredited regionally by a professional accrediting body approved by the Council for Higher Education Accreditation of the American Council on Education, or one of the following national accrediting bodies: the Accrediting Bureau of Health Education Schools (ABHES), the Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT), or the Accrediting Commission of the Distance Education and Training Council (DETC); and

(b) provide or require not less than a two academic year program of study that awards a minimum of an associate degree.

(6) In addition to the standards established in Subsections (1), (2), and (3) above, a parent education institution offering a nursing education program leading toward licensure as an APRN or APRN-CRNA shall:

(a) be accredited or preaccredited regionally by a professional

accrediting body approved by the Council for Higher Education Accreditation of the American Council on Education;

(b) admit as students, only persons having completed at least an associate degree in nursing or baccalaureate degree in a related discipline; and

(c) provide or require not less than a two academic year program of study that awards a minimum of a master's degree.

R156-31b-602. [Nursing Education Program Full Approval] Categories of Nursing Education Programs Approval Status.

~~[—(1) Full approval of a nursing program shall be granted when it becomes accredited by the NLNAC or the CCNE.~~

~~—(2) Programs which have been granted full approval as of the effective date of this rule and are not accredited, must become accredited by December 31, 2005, or be placed on probationary status.]~~

(1) Full approval status of a nursing program shall be granted and maintained by adherence to the following:

(a) current accreditation by the NLNAC, CCNE, or COA; and

(b) compliance with the standards established in Sections R156-31b-601 and 603 and the nurse accrediting body in which the program chooses to become accredited.

(2) The Division may place on probationary approval status a nursing education program for a period not to exceed three years provided the program:

(a) is located or available within the state;

(b) is found to be out of compliance with the standards for approval to the extent that the ability of the program to competently educate nursing students is impaired; and

(c) provides a plan of correction which is reasonable and includes an adequate safeguard of the student and public.

(3) The Division may grant provisional approval status to a nursing education program for a period not to exceed two years after the date of the first graduating class, provided the program:

(a) is located or available within the state;

(b) is newly organized;

(c) meets all standards established in Sections R156-31b-601 and 603; and

(d) is progressing in a timely manner to qualify for full approval status by obtaining accreditation from a nurse accrediting body.

(4) (a) A nursing education program seeking accreditation from NLNAC shall demonstrate progression toward accreditation and qualifying for full approval status by becoming a Candidate for Accreditation by the NLNAC no later than six months from the date of the first day a nursing course is offered.

(b) A program that fails to obtain NLNAC Candidacy Status as required in this Subsection shall:

(i) immediately cease accepting any new students;

(ii) the approval status of the program shall be changed to "Probationary" and if the program fails to become a Candidate for NLNAC accreditation within one year from the date of the first day a nursing course is offered, the program shall cease operation at the end of the

current academic term such as at the end of the current semester or quarter; and

(iii) a nursing education program that ceases operation under this Subsection, is eligible to submit a new application for approval status of a nursing education program to the Division for review and action no sooner than one calendar year from the date the program ceased operation.

(5) A nursing education program that has been granted provisional approval status and fails to become accredited by a nurse accrediting body within two years of the first graduating class, shall cease operation at the end of the two year period of time and the academic term, such as a semester or quarter, of that time period.

(6) After receiving notification from a nurse accrediting body of a failed site visit or denied application for accreditation by the nurse accrediting body, a nursing education program on provisional approval status shall:

(i) notify the Division and Board within 10 days of being notified of the failed site visit or denied application for accreditation;

(ii) cease operation at the end of the current academic term; and

(iii) be eligible to submit a new application for approval status of a nursing education program to the Division for review and action no sooner than one calendar year from the date the program ceased operation.

(7)(a) A nursing education program on provisional approval status shall schedule a nurse accreditation site visit no later than one calendar year from the graduation date of the first graduating class.

(b) A program that fails to schedule a site visit within one year of the first graduating class shall:

(i) cease to accept any new students;

(ii) no later than two years after the first graduating class, cease operation; and

(iii) if ceasing operation under this Subsection, be eligible to submit a new application for approval status of a nursing education program to the Division for review and action no sooner than one calendar year from the date the program ceased operation.

R156-31b-603. Nursing Education Program ~~[Provisional Approval]~~ Standards.

~~— (1) The division may grant provisional approval to a nursing education program for a period not to exceed three years after the date of the first graduating class, provided the program:~~

~~— (a) is located or available within the state;~~

~~— (b) is newly organized;~~

~~— (c) meets all standards for provisional approval as required in this section; and~~

~~— (d) is progressing in a reasonable manner to qualify for full approval by obtaining accreditation.~~

~~— (2) The general standards for provisional approval include:~~

~~— (a) the purpose and outcomes of the nursing program shall be consistent with the Nurse Practice Act and Rule and other relevant state statutes;~~

~~— (b) the purpose and outcomes of the nursing program shall be consistent with generally accepted standards of nursing practice appropriate for graduates of the type of nursing program offered;~~

~~—— (c) the input of consumers shall be considered in developing and evaluating the purpose and outcomes of the program;~~

~~—— (d) the nursing program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement;~~

~~—— (e) the curriculum shall provide diverse didactic and clinical learning experiences consistent with program outcomes;~~

~~—— (f) faculty and students shall participate in program planning, implementation, evaluation, and continuous improvement;~~

~~—— (g) the nursing program administrator shall be a professionally and academically qualified registered nurse with institutional authority and administrative responsibility for the program;~~

~~—— (h) professionally and academically qualified nurse faculty shall be sufficient in number and expertise to accomplish program outcomes and quality improvement;~~

~~—— (i) the fiscal, human, physical, clinical and technical learning resources shall be adequate to support program processes, security and outcomes;~~

~~—— (j) program information communicated by the nursing program shall be fair, accurate, complete, consistent, and readily available;~~

~~—— (k) the program must meet the criteria for nursing education programs established in Section R156-31b-601; and~~

~~—— (l) the nursing education program shall be an integral part of a governing academic institution accredited by an accrediting body that is recognized by the U.S. Secretary of Education.~~

~~—— (3) Programs which have been granted provisional approval status shall submit an annual report to the Division on the form prescribed by the Division.~~

~~—— (4) Programs which have been granted provisional approval prior to the effective date of this rule and are not accredited, must become accredited by December 31, 2005.~~

~~—— (5) A comprehensive nursing education program evaluation shall be performed annually for quality improvement and shall include but not be limited to:~~

~~—— (a) students' achievement of program outcomes;~~

~~—— (b) evidence of adequate program resources including fiscal, physical, human clinical and technical learning resources, and the availability of clinical sites and the viability of those sites to meet the objectives of the program;~~

~~—— (c) multiple measures of program outcomes for graduates such as NCLEX pass rate, student and employer survey, and successful completion of national certification programs;~~

~~—— (d) evidence that accurate program information for consumers is readily available;~~

~~—— (e) the head of the academic institution and the administration support meet program outcomes;~~

~~—— (f) the program administrator and program faculty meet board qualifications and are sufficient to achieve program outcomes; and~~

~~—— (g) evidence that the academic institution assures security of student information.~~

~~—— (6) The curriculum of the nursing education program shall enable the~~

~~student to develop the nursing knowledge, skills and competencies necessary for the level, scope and standards of nursing practice consistent with the level of licensure. The curriculum shall include:~~

~~—— (a) content regarding legal and ethical issues, history and trends in nursing and health care, and professional responsibilities;~~

~~—— (b) experiences that promote the development of leadership and management skills and professional socialization consistent with the level of licensure, including the demonstration of the ability to supervise others and provide leadership of the profession;~~

~~—— (c) learning experiences and methods of instruction, including distance education methods are consistent with the written curriculum plan;~~

~~—— (d) coursework including, but not limited to:~~

~~—— (i) content in the biological, physical, social and behavioral sciences to provide a foundation for safe and effective nursing practice;~~

~~—— (ii) didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in clients across the life span and in a variety of clinical settings, to include:~~

~~—— (A) using informatics to communicate, manage knowledge, mitigate error and support decision making;~~

~~—— (B) employing evidence-based practice to integrate best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing care;~~

~~—— (C) providing client-centered, culturally competent care:~~

~~—— (1) respecting client differences, values, preferences and expressed needs;~~

~~—— (2) involving clients in decision-making and care management;~~

~~—— (3) coordinating and managing continuous client care; and~~

~~—— (4) promoting healthy lifestyles for clients and populations;~~

~~—— (D) working in interdisciplinary teams to cooperate, collaborate, communicate and integrate client care and health promotion; and~~

~~—— (E) participating in quality improvement processes to measure client outcomes, identify hazards and errors, and develop changes in processes of client care; and~~

~~—— (c) supervised clinical practice which include development of skill in making clinical judgments, management and care of groups of clients, and delegation to and supervision of other health care providers;~~

~~—— (i) clinical experience shall be comprised of sufficient hours to meet these standards, shall be supervised by qualified faculty and ensure students' ability to practice at an entry level;~~

~~—— (ii) delivery of instruction by distance education methods must be consistent with the program curriculum plan and enable students to meet the goals, competencies and objectives of the educational program and standards of the division; and~~

~~—— (iii) all student clinical experiences, including those with preceptors, shall be directed by nursing faculty.~~

~~—— (7) Students rights and responsibilities:~~

~~—— (a) students shall be provided the opportunity to acquire and demonstrate the knowledge, skills and abilities for safe and effective nursing practice, in theory and clinical experience with faculty~~

~~oversight;~~

~~— (b) all policies relevant to applicants and students shall be available in writing;~~

~~— (c) students shall be required to meet the health standards and criminal background checks as required in Utah;~~

~~— (d) students shall receive faculty instruction, advisement and oversight; and~~

~~— (e) students shall maintain the integrity of their work.~~

~~— (8) The qualifications for the administrator of a nursing education program shall include:~~

~~— (a) the qualifications for an administrator in a program preparing an individual for licensure as an LPN shall include:~~

~~— (i) a current, active, unencumbered RN license or multistate privilege to practice nursing in Utah;~~

~~— (ii) a minimum of a masters degree in nursing or a nursing doctorate;~~

~~— (iii) educational preparation or experience in teaching and learning principles for adult education, including curriculum development and administration, and at least two years of clinical experience; and~~

~~— (iv) a current knowledge of nursing practice at the practical nurse level;~~

~~— (b) the qualifications for an administrator in a program preparing an individual for licensure as an RN shall include:~~

~~— (i) a current, active unencumbered RN license or multistate privilege to practice nursing in Utah;~~

~~— (ii) (A) associate degree program: a minimum of a masters degree in nursing or a nursing doctorate;~~

~~— (B) baccalaureate degree program: a minimum of a masters degree in nursing and an earned doctorate or a nursing doctorate;~~

~~— (iii) education preparation or experience in teaching and learning principles for adult education, including curriculum development and administration, and at least two years of clinical experience; and~~

~~— (iv) a current knowledge of RN practice;~~

~~— (c) the qualifications for an administrator/director in a graduate program preparing an individual for licensure as an APRN shall include:~~

~~— (i) a current, active unencumbered APRN license or multistate privilege to practice as an APRN in Utah;~~

~~— (ii) a minimum of a masters in nursing or a nursing doctorate in an APRN specialty;~~

~~— (iii) educational preparation or experience in teaching and learning principles for adult education, including curriculum development and administration, and at least two years of clinical experience; and~~

~~— (iv) a current knowledge of APRN practice.~~

~~— (9) The qualifications for faculty in a nursing education program shall include:~~

~~— (a) a sufficient number of qualified faculty to meet the objectives and purposes of the nursing education program;~~

~~— (b) the nursing faculty shall hold a current, active, unencumbered RN license or multistate privilege, or APRN license or multistate privilege to practice in Utah; and~~

~~— (c) clinical faculty shall hold a license or privilege to practice~~

~~and meet requirements in the state of the student's clinical site.~~

~~—— (10) The qualifications for nursing faculty who teach in a program leading to licensure as a practical nurse include:~~

~~—— (a) a minimum of a baccalaureate degree with a major in nursing;~~

~~—— (b) two years of clinical experience; and~~

~~—— (c) preparation in teaching and learning principles for adult education, including curriculum development and implementation.~~

~~—— (11) The qualifications for nursing faculty who teach in a program leading to licensure as a RN include:~~

~~—— (a) a minimum of a masters degree with a major in nursing or a nursing doctorate degree;~~

~~—— (b) two years of clinical experience; and~~

~~—— (c) preparation in teaching and learning principles for adult education, including curriculum development and implementation.~~

~~—— (12) The qualifications for nursing faculty who teach in a program leading to licensure as an APRN include:~~

~~—— (a) a minimum of a masters degree with a major in nursing or a nursing doctorate degree;~~

~~—— (b) holding a license or multistate privilege to practice as an APRN;~~

~~—— (c) two years of clinical experience practicing as an APRN; and~~

~~—— (d) preparation in teaching and learning principles for adult education, including curriculum development and implementation.~~

~~—— (13) Adjunct clinical faculty employed solely to supervise clinical nursing experiences of students shall meet all the faculty qualifications for the program level they are teaching.~~

~~—— (14) Interdisciplinary faculty who teach non-clinical nursing courses shall have advanced preparation appropriate to the area of content.~~

~~—— (15) Clinical preceptors shall have demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences after a student has received clinical and didactic instruction in all basic areas for that course or specific learning experience. Clinical preceptors should be licensed as a nurse at or above the level for which the student is preparing.~~

~~—— (16) Additional required components of graduate education programs, including post-masters certificate programs, leading to APRN licensure include:~~

~~—— (a) Each student enrolled shall be licensed or have a multistate privilege to practice as an RN in Utah;~~

~~—— (b) The curriculum shall be consistent with nationally recognized APRN roles and specialties and shall include:~~

~~—— (i) graduate nursing program core courses;~~

~~—— (ii) advanced practice nursing core courses including legal, ethical and professional responsibilities of the APRN, advanced pathophysiology, advanced health assessment, pharmacotherapeutics, and management and treatment of health care status; and~~

~~—— (iii) coursework focusing on the APRN role and specialty.~~

~~—— (c) Dual track APRN graduate programs (preparing for two~~

~~specialties) shall include content and clinical experience in both functional roles and specialties.~~

~~— (d) Instructional track/major shall have a minimum of 500 hours of supervised clinical. The supervised experience shall be directly related to the knowledge and role of the specialty and category. Specialty tracks that provide care to multiple age groups and care settings will require additional hours distributed in a way that represents the populations served.~~

~~— (e) There shall be provisions for the recognition of prior learning and advanced placement in the curriculum for individuals who hold a masters degree in nursing who are seeking preparation in a different role and specialty. Post-masters nursing students shall complete the requirements of the masters APRN program through a formal graduate level certificate or master level track in the desired role and specialty. A program offering a post-masters certificate in a specialty area must also offer a master degree course of study in the same specialty area. Post-master students must master the same APRN outcome criteria as the master level students and are required to complete a minimum of 500 supervised clinical hours.~~

~~— (f) A lead faculty member who is educated and nationally certified in the same specialty area and licensed as an APRN or possessing a APRN multistate privilege shall coordinate the educational component for the role and specialty in the APRN program.]~~

In accordance with Subsection 58-31b-601(2), the minimum standards that a nursing education program must meet to qualify graduates for licensure under this chapter are set forth as follows.

(1) A nursing education program shall meet the following standards:

(a) purposes and outcomes shall be consistent with the Nurse Practice Act and Rule and other relevant state statutes;

(b) purposes and outcomes shall be consistent with generally accepted standards of nursing practice appropriate for graduates of the type of nursing program offered;

(c) consumer input shall be considered in developing and evaluating the purpose and outcomes of the program;

(d) the program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement;

(e) the curriculum shall provide diverse, integrated didactic and clinical learning experiences across the lifespan, consistent with program outcomes;

(f) the faculty and students shall participate in program planning, implementation, evaluation, and continuous improvement;

(g) the nursing program administrator shall be professionally and academically qualified as a registered nurse with institutional authority and administrative responsibility for the program;

(h) professionally and academically qualified nurse faculty shall be sufficient in number and expertise to accomplish program outcomes and quality improvement;

(i) fiscal, human, physical, clinical and technical learning resources shall be adequate to support program processes, security and outcomes;

(j) program information communicated by the nursing program shall be fair, accurate, complete, consistent, and readily available;

(k) the program shall meet all the criteria established in this rule;

(l) the program shall be an integral part of a parent academic institution which is accredited by an accrediting body that is recognized by the U.S. Secretary of Education; and

(m) the program shall require students to obtain general education, pre-requisite, and co-requisites courses from a regionally accredited institution of higher education, or have in place an articulation agreement with a regionally accredited institution of higher education.

(2) A comprehensive nursing education program evaluation shall be performed annually for quality improvement and shall include but not be limited to:

(a) students' achievement of program outcomes;

(b) evidence of adequate program resources including fiscal, physical, human, clinical and technical learning resources, and the availability of clinical sites and the viability of those sites to meet the objectives of the program;

(c) multiple measures of program outcomes for graduates such as NCLEX pass rate, student and employer survey, and successful completion of national certification programs;

(d) evidence that accurate program information for consumers is readily available;

(e) evidence that the head of the academic institution and the administration support program outcomes;

(f) evidence that the program administrator and program faculty meet board qualifications and are sufficient to achieve program outcomes; and

(g) evidence that the academic institution assures security of student information.

(3) The curriculum of the nursing education program shall enable the student to develop the nursing knowledge, skills and competencies necessary for the level, scope and standards of nursing practice consistent with the level of licensure. The curriculum shall include:

(a) content regarding legal and ethical issues, history and trends in nursing and health care, and professional responsibilities;

(b) experiences that promote the development of leadership and management skills and professional socialization consistent with the level of licensure, including the demonstration of the ability to supervise others and provide leadership of the profession;

(c) learning experiences and methods of instruction, including distance education methods, consistent with the written curriculum plan;

(d) coursework including, but not limited to:

(i) content in the biological, physical, social and behavioral sciences to provide a foundation for safe and effective nursing practice;

(ii) didactic content integrated with supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the life span and in a variety of clinical settings, to include:

(A) using informatics to communicate, manage knowledge, mitigate error and support decision making;

(B) employing evidence-based practice to integrate best research with clinical expertise and patient values for optimal care, including skills to identify and apply best practices to nursing care;

(C) providing patient-centered, culturally competent care:

(1) respecting patient differences, values, preferences and expressed needs;

(2) involving patients in decision-making and care management;

(3) coordinating and managing continuous patient care; and

(4) promoting healthy lifestyles for patients and populations;

(D) working in interdisciplinary teams to cooperate, collaborate, communicate and integrate patient care and health promotion; and

(E) participating in quality improvement processes to measure patient outcomes, identify hazards and errors, and develop changes in processes of patient care;

(e) supervised clinical practice which includes development of skill in making clinical judgments, management and care of groups of patients, experience with interdisciplinary teamwork, working with families in the provision of care, managing crisis situations, and delegation to and supervision of other health care providers:

(i) clinical experience shall be comprised of sufficient hours, shifts, variety of populations, and hands-on practice to meet these standards, and ensure students' ability to practice at an entry level;

(ii) no more than 25% of the clinical hours can be obtained in a nursing skills laboratory, or by clinical simulation or virtual clinical excursions;

(iii) all student clinical experiences, including those with preceptors, shall be supervised by qualified nursing faculty at a ratio of not more than 10 students to one faculty member unless the experience includes students working with preceptors who can be supervised at a ratio of not more than 15 students to one faculty member; and

(iv) nursing faculty, must be on-site with students during all fundamental, medical-surgical and acute care clinical experiences;

(f)(i) clinical preceptors may be used to enhance faculty-directed clinical learning experiences after a student has completed didactic and clinical instruction in all foundational courses including introduction to nursing, fundamentals, medical-surgical, obstetrics, and pediatrics. Therefore, clinical preceptors shall not be utilized in LPN nursing programs.

(ii) a clinical preceptor shall:

(A) demonstrate competencies related to the area of assigned clinical teaching responsibilities;

(B) serve as a role model and educator to the student;

(C) be licensed as a nurse at or above the level for which the student is preparing;

(D) not be used to replace clinical faculty;

(F) be provided with a written document defining the functions and responsibilities of the preceptor;

(G) confer with the clinical faculty member and student for monitoring and evaluating learning experiences, but the clinical faculty member shall retain responsibility for student learning; and

(H) not supervise more than two students during any one scheduled

work time or shift; and

(g) delivery of instruction by distance education methods must be consistent with the program curriculum plan and enable students to meet the goals, competencies and objectives of the educational program and standards of the division.

(4) Students rights and responsibilities:

(a) opportunities to acquire and demonstrate the knowledge, skills and abilities for safe and effective nursing practice, in theory and clinical experience with faculty oversight shall be provided to students;

(b) all policies shall be written and available to students;

(c) students shall be required to meet the health standards and criminal background checks as required in Utah;

(d) students shall receive faculty instruction, advisement and oversight;

(e) students shall maintain the integrity of their work;

(f) (i) an applicant accepted into a nursing education program that has received provisional approval status from the Division, must sign a disclaimer form indicating the applicant's knowledge of the provisional approval status of the program, and the lack of a guarantee that the program will achieve national nursing accreditation and full approval status from the Division; and

(ii) the disclaimer shall also contain a statement regarding the lack of a guarantee that the credit received from the provisionally approved program will be accepted by or transferable to another educational facility; and

(g) an applicant accepted into a nursing education program or a student of a nursing education program that is on or receives probationary approval status from the Division, must sign a disclaimer form indicating the applicant or student has knowledge of the program's probationary approval status, and the lack of a guarantee that the program will maintain any approval status or will be able to offer the complete program.

(5) An administrator of a nursing education program shall meet the following requirements:

(a) a program preparing an individual for licensure as an LPN:

(i) have a current, active, unencumbered RN or APRN license or multistate privilege to practice nursing in Utah;

(ii) have a minimum of an earned graduate degree with a major in nursing, or a baccalaureate degree in nursing and an earned doctoral degree in a related discipline from a nurse accredited education program or regionally accredited institution;

(iii) have academic preparation in curriculum and instruction;

(iv) have at least three years of experience teaching in an accredited nursing education program;

(v) have knowledge of current LPN practice; and

(vi) have adequate time to fulfill the role and responsibilities of a program administrator;

(b) a program preparing an individual for licensure as an RN:

(i) have a current, active, unencumbered RN or APRN license or multistate privilege to practice nursing in Utah;

(ii) (A) associate degree program: have a minimum of an earned

graduate degree with a major in nursing from a nurse accredited education program;

(B) baccalaureate degree program: have a minimum of an earned graduate degree in nursing and an earned doctorate in nursing or a related discipline from a nurse accredited program or regionally accredited institution;

(iii) have academic preparation in curriculum and instruction;

(iv) have at least three years of experience teaching in an accredited nursing education program;

(v) have knowledge of current RN practice; and

(vi) have adequate time to fulfill the role and responsibilities of a program administrator;

(c) a program preparing an individual for licensure as an APRN:

(i) have a current, active, unencumbered RN or APRN license or multistate privilege to practice nursing in Utah;

(ii) have a minimum of an earned graduate degree with a major in nursing and an earned doctorate in nursing or a related discipline from a nurse accredited program or regionally accredited institution;

(iii) have academic preparation in curriculum and instruction;

(iv) have at least three years of experience teaching in an accredited nursing education program;

(v) have knowledge of current nursing practice;

(vi) have adequate time to fulfill the role and responsibilities of a program administrator; and

(v) if the program administrator is not a licensed APRN, then the program must also have a director that meets the qualifications of Subsection (d) below;

(d) the director of a graduate program preparing an individual for licensure as an APRN shall meet the following requirements:

(i) have a current, active, unencumbered APRN license or multistate privilege to practice as an APRN in Utah;

(ii) have a minimum of an earned graduate degree with a major in nursing in an APRN role and specialty from a nurse accredited program;

(iii) have educational preparation in curriculum and instruction;

(iv) have at least three years of experience teaching in an accredited nursing education program;

(v) have knowledge of current APRN practice; and

(vi) have adequate time to fulfill the role and responsibilities of a program director.

(6) The qualifications for nursing faculty who teach didactic, clinical, or in a skills practice laboratory, in a nursing education program shall include:

(a) a program preparing an individual for licensure as an LPN:

(i) have a current, active, unencumbered RN or APRN license or multistate privilege to practice nursing in Utah;

(ii) have a baccalaureate degree in nursing or an earned graduate degree with a major in nursing from a nurse accredited program, the majority of faculty (at least 51%) shall have an earned graduate degree with a major in nursing from a nurse accredited program;

(iii) have at least two years of clinical experience;

(iv) (A) have educational preparation in curriculum and instruction;

or

(B) have at least three years of experience teaching in an accredited nursing education program; and

(v) the majority of faculty shall have documented educational preparation as specified in Subsection (iv)(A) above;

(b) a program preparing an individual for licensure as an RN:

(i) have a current, active, unencumbered RN or APRN license or multistate privilege to practice nursing in Utah;

(ii) have an earned graduate degree with a major in nursing from a nurse accredited program or be currently enrolled in a graduate level accredited nursing education program with graduation from the program no later than three years from the date of hire;

(iii) have at least two years of clinical experience;

(iv) (A) have educational preparation in curriculum and instruction;

or

(B) have at least three years of experience teaching in an accredited nursing education program; and

(v) the majority of faculty shall have documented educational preparation as specified in Subsection (iv)(A) above;

(c) a program preparing an individual for licensure as an APRN:

(i) have a current, active, unencumbered APRN license or multistate privilege to practice nursing in Utah;

(ii) have an earned graduate degree with a major in nursing in an APRN role and specialty from a nurse accredited program or regionally accredited institution; the majority of the faculty shall have an earned doctorate from a regionally accredited institution;

(iii) have at least two years of clinical experience practicing as an APRN;

(iv) (A) have educational preparation in curriculum and instruction;

or

(B) have at least three years of experience teaching in an accredited nursing education program; and

(v) the majority of faculty shall have documented educational preparation as specified in Subsection (iv)(A) above.

(7) At the time this Rule becomes effective, any currently employed nursing faculty member who does not meet the criteria established in Subsection (6), shall have until July 1, 2011 to meet the criteria.

(8) Adjunct clinical faculty, except clinical associates, employed solely to supervise clinical nursing experiences of students shall meet all the faculty qualifications for the program level they are teaching. A clinical associate is a staff member of a health care facility with an earned graduate degree or a student currently enrolled in a graduate nursing education program, who is given release time from the facility to provide clinical supervision to other students. The clinical associate is supervised by a graduate prepared mentor faculty member.

(9) Interdisciplinary faculty who teach non-clinical nursing courses shall have advanced preparation appropriate to the area of content.

(10) A nursing education program preparing graduates for licensure as either an LPN or RN must maintain an average pass rate on the applicable NCLEX examination that is no more than 5% below the national average pass rate for the same time period.

(11) A program that has received full approval status from the Division in collaboration with the board and is accredited by either CCNE or NLNAC:

(a) if the low NCLEX pass rate occurs twice, either after two consecutive graduation cycles or over a two year period of time, the program shall be issued a letter of warning by the Division in collaboration with the Board, and within 30 days from the date of the letter of warning, the program administrator shall submit a written remediation plan to the Board for approval;

(b) if the low NCLEX pass rate occurs three times either after three consecutive graduation cycles or over a two year period of time, the program administrator shall schedule and participate in a meeting with the Board to discuss the approved remediation plan and its implementation, and the program's approval status shall be changed to "Probationary"; and

(c) if the low NCLEX pass rate occurs four times either after four consecutive graduation cycles or over a two year period of time, the program shall cease accepting new students;

(i) if the program is unable to raise the pass rate to the required level after five consecutive graduation cycles or over a two year period of time, the program shall cease operation at the end of the current academic timeframe such as at the end of the current semester or quarter; and

(ii) a nursing education program that ceases to operate under this Subsection, may submit a new application for approval status of a nursing education program to the Division for review and action no sooner than one year from the date the program ceases to operate.

(12) A program that has been granted provisional approval status by the Division in collaboration with the Board, but has not received either CCNE or NLNAC accreditation:

(a) if a low NCLEX pass rate occurs after any one graduation cycle, the program shall be issued a letter of warning by the Division in collaboration with the Board, and within 30 days from the date of the letter of warning, the program administrator shall submit a written remediation plan to the Board for approval;

(b) if the low NCLEX pass rate occurs twice, either after two consecutive graduation cycles, or a two year period of time, the program administrator shall schedule and participate in a meeting with the Board to discuss the approved remediation plan and its implementation and the program's approval status shall be changed to "Probationary"; and

(c) if the low NCLEX pass rate occurs three times either after three consecutive graduation cycles or over a two year period of time, the program shall cease accepting new students;

(i) if the program is unable to raise the pass rate to the required level after four consecutive graduation cycles or over a two year period of time, the program shall cease operation at the end of the current academic timeframe such as at the end of the current semester or quarter; and

(ii) a nursing education program that ceases operation under this Subsection, may submit a new application for approval status of a nursing education program to the Division for review and action no sooner than one year from the date the program ceases to operate.

(13) Additional required components of graduate education programs, including post-masters certificate programs, leading to APRN licensure include:

(a) each student enrolled shall be licensed or have a multistate privilege to practice as an RN in Utah;

(b) the curriculum shall be consistent with nationally recognized APRN roles and specialties and shall include:

(i) graduate level advanced practice nursing core courses including legal, ethical and professional responsibilities of the APRN, advanced pathophysiology, advanced health assessment, pharmacotherapeutics, and management and treatment of health care status; and

(ii) coursework focusing on the APRN role and specialty;

(c) dual track APRN graduate programs (preparing for two specialties) shall include content and clinical experience in both functional roles and specialties;

(d) instructional track/major shall have a minimum of 500 hours of supervised clinical experience directly related to the recognized APRN role and specialty;

(e) specialty tracks that provide care to multiple age groups and care settings shall require additional hours distributed in a manner that represents the populations served;

(f) there shall be provisions for the recognition of prior learning and advanced placement in the curriculum for individuals who hold a masters degree in nursing who are seeking preparation in a different role and specialty;

(g) post-masters nursing students shall complete the requirements of the APRN masters program through a formal graduate level certificate or master level track in the desired role and specialty;

(i) a program offering a post-masters certificate in a specialty area must also offer a master degree course of study in the same specialty area; and

(ii) post-master students must master the same APRN outcome criteria as the master level students and are required to complete a minimum of 500 supervised clinical hours; and

(h) a lead faculty member who is educated and nationally certified in the same specialty area and licensed as an APRN or possessing an APRN multistate privilege shall coordinate the educational component for the role and specialty in the APRN program.

R156-31b-604. Nursing Education Program - Disciplinary Action[~~Probationary Approval~~].

~~[(1) The division may place on probationary approval status a nursing education program for a period not to exceed three years provided the program:~~

~~— (a) is located or available within the state;~~

~~— (b) is found to be out of compliance with the standards for provisional or full approval to the extent that the ability of the program to competently educate nursing students is impaired; and~~

~~— (c) provides a plan of correction which is reasonable and includes an adequate safeguard of the student and public.~~

~~— (2) The division may place on probationary approval status a program~~

~~which implements an outreach program or satellite program without prior notification to the Division.~~

~~(3) Programs which have been granted probationary approval status shall submit an annual report to the division on the form prescribed by the division.]~~

(1) The Division, in collaboration with the Board, may conduct an administrative hearing or issue a Memorandum of Understanding and Order placing a nursing program on probationary status for any of the following reasons:

- (a) change in nurse accreditation status;
- (b) failure to maintain the standards established by the nurse accreditation bodies such as receiving significant deficiencies during a review as evidenced by conditions being placed on the program;
- (c) failure to maintain the standards established in this rule;
- (d) pass rate of more than 5% below the national average;
- (e) low graduation rate defined as the percent of first-time, degree seeking students who graduate longer than 150% of the designated time for graduation;
- (f) sudden, high, or frequent faculty attrition;
- (g) frequent program administrator turnover;
- (h) national certification pass rate less than 80%; and
- (i) implementation of a new education program, or an outreach or satellite nursing education program without prior notification to the Division.

(2) The Division, in collaboration with the Board, may take any of the following actions upon a nursing education program:

- (a) issue an Order changing the approval status of the program;
- (b) limit or restrict enrollment of new students or require the program to cease accepting new students within a specified timeframe;
- (c) require the program director to meet with the Board or its designee, and present a remediation plan to correct any problems within a specified time frame;
- (d) establish specific criteria that must be met within a specific length of time;
- (e) withdraw approval status; or
- (f) issue a cease and desist Order.

(3) Any adjudicative proceeding in regards to a nursing education program shall be classified as a formal adjudicative proceeding and shall comply with Title 63G, Chapter 4, the Utah Administrative Procedures Act.

R156-31b-605. Nursing Education Program Notification of Change.

(1) Educational institutions wishing to begin a new nursing education program shall submit an application to the division for approval status at least one year prior to the implementation of the program.

(2) An approved program that expands onto a satellite campus or implements an outreach program shall notify the Division at least one semester before the intended change.

R156-31b-606. Nursing Education Program Surveys.

(1) The [d]Division [may]shall conduct an annual survey of nursing education programs to monitor compliance with this rule. The survey may

include the following:

([1]a) a copy of the program's annual report to a nurse accrediting body;

([2]b) a copy of any changes submitted to any nurse accrediting body; and

([3]c) a copy of any accreditation self study summary report.

(2) Programs which have been granted provisional approval status shall submit to the Division a copy of all correspondence between the program and the nurse accrediting body within 10 days of receipt or submission.

R156-56-607. Approved Nursing Education Programs Located Outside of Utah.

(1) In accordance with Section 58-31b-302, an approved nursing education program located outside of Utah must meet the following requirements in order for a graduate to meet the educational requirement for licensure in this state:

(a) be accredited by the CCNE, NLNAC or COA; or

(b) be approved by the Board of Nursing or an equivalent agency in the state in which the nursing education program is offered.

R156-31b-60[7]8. Standards for Out-of-State Programs Providing Clinical Experiences in Utah.

In accordance with Subsection 58-31b-601(2), the minimum standards that a nursing education program which is located outside the state must meet to allow students to obtain clinical experiences in Utah are set forth as follows.

(1) An entry level distance learning nursing education program which leads to licensure utilizing precepted clinical experiences in Utah must meet the following criteria:

(a) parent nursing education-program must be Board of Nursing approved in the state of primary location (business), be nationally accredited by either NLNAC, CCNE, or COA, and must be affiliated with an institution of higher education;

(b) parent nursing education-program clinical faculty supervisor must be licensed in Utah or a Compact state;

(c) preceptors within the health care facilities must be licensed in good standing, in Utah or a Compact State;

(d) parent nursing education-program must have a contract with the Utah health care facilities that provide the clinical sites; and

(e) parent nursing education-program must document compliance with the above stated criteria, along with a request to be approved to have a student who is exempt from licensure under Subsection 58-1-307(c).

(2) A nursing education program located in another state that desires to use Utah health care facilities for clinical experiences for one or more students must meet the following criteria:

(a) be approved by the home state Board of Nursing, be nationally accredited by ~~[either]~~ NLNAC, ~~[or]~~ CCNE, or COA and ~~[must]~~ be affiliated with an institution of higher education;

(b) clinical faculty must be employed by the nursing education program, meet the requirements to be a faculty member as established by the accrediting body and the program's Board of Nursing, and must be

licensed, in good standing in Utah or a Compact state;

(c) preceptors within the health care facilities must be licensed, in good standing, in Utah or a Compact state;

(d) have a contract with the Utah health care facilities that provide the clinical sites;

(e) submit an annual report on forms provided by the Division of Occupational and Professional Licensing and Utah Board of Nursing; and

(f) document compliance with the above stated criteria, along with a request to be approved to have a student(s) who is exempt from licensure under Subsection 58-1-307(c) [~~of the Utah Code~~].

(3) A distance learning didactic nursing education program with a Utah based [~~proprietary~~] postsecondary school which provides tutoring services, facilitates clinical site selection, and provides clinical site faculty must meet the following criteria:

(a) parent nursing education-program must be approved by the Board of Nursing in the state of primary location (business), be nationally accredited by [~~either~~] NLNAC, [~~or~~] CCNE, or COA and must be affiliated with an institution of higher education;

(b) a formal contract must be in place between the parent nursing education-program and the Utah postsecondary school;

(c) parent nursing education-program and Utah postsecondary school must submit an application for program approval status by the Division of Occupational and Professional Licensing in collaboration with the Board of Nursing in Utah, utilizing the parent-program's existing curriculum. Approval status is granted to the parent nursing education-program, not to the postsecondary school;

(d) clinical faculty [~~(mentors)~~] must be employed by the parent nursing education-program (this can be as a contractual faculty member), meet the requirements to be a faculty member as established by the accrediting body and the parent nursing education-program's Board of Nursing, and must be licensed, in good standing in Utah or a Compact state;

(e) clinical faculty supervisor(s) located at the parent nurse education-program must be licensed, in Utah or a Compact state;

(f) parent nursing education-program [~~is~~] shall be responsible for conducting the nursing education program, the program's policies and procedures, and the selection of the students;

(g) parent nursing education-program must have a contract with the Utah health care facilities that provide the clinical sites; and

(h) the parent nursing education-program shall submit an annual report on forms provided by the Division of Occupational and Professional Licensing and Utah Board of Nursing.

R156-31b-703. Generally Recognized Scope of Practice of an LPN.

In accordance with Subsection 58-31b-102(15), the LPN practicing within the generally recognized LPN scope of practice practices as follows:

(1) In demonstrating professional accountability, shall:

(a) practice within the legal boundaries for practical nursing through the scope of practice authorized in statute and rule;

(b) demonstrate honesty and integrity in nursing practice;

(c) base nursing decisions on nursing knowledge and skills, and the needs of patients~~[/clients]~~;

(d) accept responsibility for individual nursing actions, competence, decisions and behavior in the course of practical nursing practice; and

(e) maintain continued competence through ongoing learning and application of knowledge in the ~~[client's]~~patient's interest.

(2) In demonstrating the responsibility for nursing practice implementation shall:

(a) conduct a focused nursing assessment;

(b) plan for episodic nursing care;

(c) demonstrate attentiveness and provides patient~~[/client]~~ surveillance and monitoring;

(d) assist in identification of ~~[client]~~patient needs;

(e) seek clarification of orders when needed;

(f) demonstrate attentiveness and provides observation for signs, symptoms and changes in ~~[client]~~patient condition;

(g) assist in the evaluation of the impact of nursing care, and contributes to the evaluation of patient~~[/client]~~ care;

(h) recognize ~~[client]~~patient characteristics that may affect the patient's~~[/client's]~~ health status;

(i) obtain orientation/training competency when encountering new equipment and technology or unfamiliar care situations;

(j) implement appropriate aspects of ~~[client]~~patient care in a timely manner~~[+]~~:

(i) provide assigned and delegated aspects of patient's~~[/client's]~~ health care plan;

(ii) implement treatments and procedures; and

(iii) administer medications accurately;

(k) document care provided;

(l) communicate relevant and timely ~~[client]~~patient information with other health team members including:

(i) patient~~[/client]~~ status and progress;

(ii) patient~~[/client]~~ response or lack of response to therapies;

(iii) significant changes in patient~~[/client]~~ condition; or

(iv) patient~~[/client]~~ needs;

(m) participate in nursing management~~[+]~~:

(i) assign nursing activities to other LPNs;

(ii) delegate nursing activities for stable patients~~[/clients]~~ to unlicensed assistive personnel;

(iii) observe nursing measures and provide feedback to nursing manager; and

(iv) observe and communicate outcomes of delegated and assigned activities;

(n) take preventive measures to protect patient~~[/client]~~, others and self;

(o) respect patient's~~[/client's]~~ rights, concerns, decisions and dignity;

(p) promote a safe ~~[client]~~patient environment;

(q) maintain appropriate professional boundaries; and

(r) assume responsibility for own decisions and actions.

(3) In being a responsible member of an interdisciplinary health care team shall:

(a) function as a member of the health care team, contributing to the implementation of an integrated health care plan;

(b) respect ~~[client]~~patient property and the property of others; and

(c) protect confidential information unless obligated by law to disclose the information.

R156-31b-704. Generally Recognized Scope of Practice of an RN.

In accordance with Subsection 58-31b-102(16), the RN practicing within the generally recognized RN scope of practice practices as follows:

(1) In demonstrating professional accountability, shall:

(a) practice within the legal boundaries for nursing through the scope of practice authorized in statute and rule;

(b) demonstrate honesty and integrity in nursing practice;

(c) base professional decisions on nursing knowledge and skills, and the needs of patients~~[/clients]~~;

(d) accept responsibility for judgments, individual nursing actions, competence, decisions and behavior in the course of nursing practice; and

(e) maintain continued competence through ongoing learning and application of knowledge in the patient's~~[/client's]~~ interest.

(2) In demonstrating the responsibility for nursing practice implementation shall:

(a) conduct a comprehensive nursing assessment;

(b) detect faulty or missing patient~~[/client]~~ information;

(c) apply nursing knowledge effectively in the synthesis of the biological, psychological, spiritual and social aspects of the patient's~~[/client's]~~ condition;

(d) utilize this broad and complete analysis to plan strategies of nursing care and nursing interventions that are integrated within the patient's~~[/client's]~~ overall health care plan;

(e) provide appropriate decision making, critical thinking and clinical judgment to make independent nursing decisions and identification of health care needs;

(f) seek clarification of orders when needed;

(g) implement treatments and therapy, including medication administration, delegated medical and independent nursing functions;

(h) obtain orientation/training for competence when encountering new equipment and technology or unfamiliar situations;

(i) demonstrate attentiveness and provides ~~[client]~~patient surveillance and monitoring;

(j) identify changes in patient's~~[/client's]~~ health status and comprehends clinical implications of patient~~[/client]~~ signs, symptoms and changes as part of expected and unexpected patient~~[/client]~~ course or emergent situations;

(k) evaluate the impact of nursing care, the patient's~~[/client's]~~ response to therapy, the need for alternative interventions, and the need to communicate and consult with other health team members;

(l) document nursing care;

(m) intervene on behalf of patient~~[/client]~~ when problems are identified and revises care plan as needed;

(n) recognize patient[/client] characteristics that may affect the patient's[/client's] health status; and

(o) take preventive measures to protect patient[/client], others and self.

(3) In demonstrating the responsibility to act as an advocate for patient[/client] shall:

(a) respect the patient's[/client's] rights, concerns, decisions and dignity;

(b) identify patient[/client] needs;

(c) attend to patient[/client] concerns or requests;

(d) promote safe patient[/client] environment;

(e) communicate patient[/client] choices, concerns and special needs with other health team members regarding:

(i) patient[/client] status and progress;

(ii) patient[/client] response or lack of response to therapies; and

(iii) significant changes in patient[/client] condition;

(f) maintain appropriate professional boundaries;

(g) maintain patient[/client] confidentiality; and

(h) assume responsibility for own decisions and actions.

(4) In demonstrating the responsibility to organize, manage and supervise the practice of nursing, shall:

(a) assign to another only those nursing measures that fall within that nurse's scope of practice, education, experience and competence or unlicensed person's role description;

(b) delegate to another only those nursing measures which that person has the necessary skills and competence to accomplish safely;

(c) match patient[/client] needs with personnel qualifications, available resources and appropriate supervision;

(d) communicate directions and expectations for completion of the delegated activity;

(e) supervise others to whom nursing activities are delegated or assigned by monitoring performance, progress and outcome, and assures documentation of the activity;

(f) provide follow-up on problems and intervenes when needed;

(g) evaluate the effectiveness of the delegation or assignment;

(h) intervene when problems are identified and revises plan of care as needed;

(i) retain professional accountability for nursing care as provided;

(j) promote a safe and therapeutic environment by:

(i) providing appropriate monitoring and surveillance of the care environment;

- (ii) identifying unsafe care situations; and
 - (iii) correcting problems or referring problems to appropriate management level when needed; and
 - (k) teach and counsel patient~~[/client]~~ families regarding health care regimen, which may include general information about health and medical condition, specific procedures and wellness and prevention.
- (5) In being a responsible member of an interdisciplinary health care team shall:
- (a) function as a member of the health care team, collaborating and cooperating in the implementation of an integrated patient~~[/client]~~-centered health care plan;
 - (b) respect patient~~[/client]~~ property, and the property of others; and
 - (c) protect confidential information.
- (6) In being the chief administrative nurse shall:
- (a) assure that organizational policies, procedures and standards of nursing practice are developed, kept current and implemented to promote safe and effective nursing care;
 - (b) assure that the knowledge, skills and abilities of nursing staff are assessed and that nurses and nursing assistive personnel are assigned to nursing positions appropriate to their determined competence and licensure/certification/registration level;
 - (c) assure that competent organizational management and management of human resources within the nursing organization are established and implemented to promote safe and effective nursing care; and
 - (d) assure that thorough and accurate documentation of personnel records, staff development, quality assurance and other aspects of the nursing organization are maintained.
- (7) When functioning in a nursing program educator (faculty) role shall:
- (a) teach current theory, principles of nursing practice and nursing management;
 - (b) provide content and clinical experiences for students consistent with statutes and rule;
 - (c) supervise students in the provision of nursing services; and
 - (d) evaluate student scholastic and clinical performance with expected program outcomes.

KEY: licensing, nurses

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